PTOL-85b (Rev. 8-82))	rtment of Car	merce										
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INVENTOR(S) ADDRESS CHANGE SOSARIAL NO.						ILING INSTRUC		Cas Dassins										
Street Address City, State and Zip Code					All further correspondence including the Issue Fee Receipt, the Patent, and advanced orders will be mailed to the addressee entered in section 1 on PTOL-85c, unless you direct otherwise by specifying the appropriate name and address in 1A below. 2A. The COMMISSIONER OF PATENTS AND TRADEMARKS is requested to apply the Issue Fee to the application identified below.													
										CO-INVENTOR'S NAME					(Signature of pa	arty in interest of	· //_ record)	(Date)
										Street Address					Basil P. Ma	•		7/18/8
City, State and Zip Code					Note: The Issue Fee will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the Patent and Trademark Office.													
Check if additional changes are on reverse side.																		
SC/SERIAL NO.	FILING DATE	TOTAL CLAIMS	EXAM	IINEF	R AND GROUP ART	UNIT	DATE MA	AILED										
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First Selective Applicant		HUGH																
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1A. Further correspondence to be mailed to the following: 2B				3. For printing on the patent front page, list the names of not more than 3 registered patent attorneys or agents OR, alternatively, the name of a firm having as a member a registered attorney or agent. If no name is listed, no name will be printed. 3 & BICKNELL														
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3. ASSIGNMENT DATA (print or type)																		
A. (1) This application is NOT assigned. (2) XX Assignment previously submitted to the Patent and Trademark Office. (3) Assignment submitted herewith.				The following fees are enclose: X Issue fee XX Advanced order Assignment recording														
B. For Printing On The Patent: (Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data below is only appropriate when an assignment has been previously submitted to the PTO or is submitted herewith. Completion of this form is NOT a substitute for filing of an assignment as required by 37 C.F.R. 1.334).				The following fees should be charged to deposit acc. no. (PTOL-85c or additional copy of PTOL-85b must be enclosed)														
(1) NAME OF ASSIGNEE:				Issue fee														
FISONS LIMITED //5				Advanced order														
(2) ADDRESS: (City & State or Country) ENGLAND				☐ Assignment recording														
(3) STATE OF INCORPORATION, IF ASSIGNEE IS A CORPORATION:				Number of advanced order copies requested. 10 (must be for 10 or more copies)														
(GREAT BRITAIN)																		